DATE 9/22/15

To the honorable, the City Council of the City of Cambridge The undersigned respectfully pray

Name of Petitioner or Business Address Address
Be granted permission for a/an () "A" FRAMED SIGN, () SANDWICH BOARD, OA (DISPLAY OF MERCHANDISE () Temporary Banners Hung Across Public Way (Abutters approval forms required)
() # of TABLES, for restaurant seating () Y () N, () # of CHAIRS REQUESTING () Y () N
Permit Fee: \$75.00 per year renewable on or before March 31
In front of premises numbered 210 Broadway, on Address where sign or seating will be
Check the Days off the week
S S S S
Monday Tuesday Wednesday Thursday Friday Saturday Sunday
Time period: FROM 9 A.M. TO 5 P.M. inde here tely
Petitioner signature
Print name here Ulga Huschoel
Telephone number $617 863 - 37 \sqrt{7}$
Emergency # 617 470 81 7 5
Email Address <u>olgadnginworkplace</u> .com

PLEASE ATTACH A SKETCH TO YOUR APPLICATION ILLUSTRATING YOUR REQUEST

Petitioner must also provide and have on record a Certificate of Insurance Coverage (naming the City of Cambridge) as the holder. Coverage amount should be in the sum of 1,000,000.00

